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APPLICANTS

Robert H. Montgomery JR., Everett, PA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/26/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	PA	4	16	4
Examiner's Signature	Initials			

ADDRESS

27877
KENNAMETAL INC.
P.O. BOX 231
1600 TECHNOLOGY WAY
LATROBE , PA
15650

TITLE

T- SHAPED CUTTER TOOL ASSEMBLY WTH WEAR SLEEVE

FILING FEE RECEIVED 1546	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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